

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		8	6-29-01
FORMALITY REVIEW	CK	1109	8-14-01
RESPONSE FORMALITY REVIEW	H-5	166	11-26-01

INDEX OF CLAIMS

✓ Rejected
 □ Allowed
 - (Through numeral)..... Canceled
 + Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final Original	
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet-h re

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10/9/01
 11/26/01
 11-57